

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)**

SERIAL NO.

869107

FILING DATE

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			IND.		DEP.			IND.		DEP.			IND.		DEP.	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.		IND.	DEP.		
1																					
2																					
3																					
4																					
5																					
6																					
7																					
8																					
9																					
10																					
11																					
12																					
13																					
14																					
15																					
16																					
17																					
18																					
19																					
20																					
21																					
22																					
23																					
24																					
25																					
26																					
27																					
28																					
29																					
30																					
31																					
32																					
33																					
34																					
35																					
36																					
37																					
38																					
39																					
40																					
41																					
42																					
43																					
44																					
45																					
46																					
47																					
48																					
49																					
50																					
TOTAL IND.																					
TOTAL DEP.																					
TOTAL CLAIMS																					
51																					
52																					
53																					
54																					
55																					
56																					
57																					
58																					
59																					
60																					
61																					
62																					
63																					
64																					
65																					
66																					
67																					
68																					
69																					
70																					
71																					
72																					
73																					
74																					
75																					
76																					
77																					
78																					
79																					
80																					
81																					
82																					
83																					
84																					
85																					
86																					
87																					
88																					
89																					
90																					
91																					
92																					
93																					
94																					
95																					
96																					
97																					
98																					
99																					
100																					
TOTAL IND.																					
TOTAL DEP.																					
TOTAL CLAIMS																					

PTO-1380 (3-78)

\*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. DEPARTMENT OF COMMERCE  
Patent and Trademark Office

<b>MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET</b> (FOR USE WITH FORM PTO-875)								SERIAL NO. _____ FILING DATE _____					
								APPLICANT(S) _____					
CLAIMS													
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
101								151					
102								152					
103								153					
104								154					
105								155					
106								156					
107								157					
108								158					
109								159					
110								160					
111								161					
112								162					
113								163					
114								164					
115								165					
116								166					
117								167					
118								168					
119								169					
120								170					
121								171					
122								172					
123								173					
124								174					
125								175					
126								176					
127								177					
128								178					
129								179					
130								180					
131								181					
132								182					
133								183					
134								184					
135								185					
136								186					
137								187					
138								188					
139								189					
140								190					
141								191					
142								192					
143								193					
144								194					
145								195					
146								196					
147								197					
148								198					
149								199					
150								200					
TOTAL IND.		↓		↓		↓		TOTAL IND.		↓		↓	↓
TOTAL DEP.		←		←		←		TOTAL DEP.		←		←	←
TOTAL CLAIMS								TOTAL CLAIMS					

<b>MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET</b> (FOR USE WITH FORM PTO-875)								SERIAL NO. _____		FILING DATE _____			
CLAIMS										APPLICANT(S) _____			
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
201													
202													
203													
204	1												
205													
206													
207													
208													
9													
10													
11													
12													
13													
14													
15													
16													
17													
18													
19													
20													
21													
22													
23													
24													
25													
26													
27													
28													
29													
30													
31													
32													
33													
34													
35													
36													
37													
38													
39													
40													
41													
42													
43													
44													
45													
46													
47													
48													
49													
50													
51													
52													
53													
54													
55													
56													
57													
58													
59													
60													
61													
62													
63													
64													
65													
66													
67													
68													
69													
70													
71													
72													
73													
74													
75													
76													
77													
78													
79													
80													
81													
82													
83													
84													
85													
86													
87													
88													
89													
90													
91													
92													
93													
94													
95													
96													
97													
98													
99													
100													
TOTAL IND.	14	↓		↓		↓		TOTAL IND.		↓		↓	↓
TOTAL DEP.	125	←		←		←		TOTAL DEP.		←		←	←
TOTAL CLAIMS	139							TOTAL CLAIMS					